IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

UTILITY PATENT APPLICATION TRANSMITTAL LETTER

19587 U.S. PTO 10/826332

Mail Stop PATENT APPLICATION

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Customer Number 2 1 8 3 9

Sir:									
	Enclosed for filing is the utility patent application entitled:								
	Master Cylii	nder with a Braking	Stroke Simulator						
by the following named inventor(s):									
	Akihito KUS	ANO							
					,				
	Applicant(s) suggests Figure for inclusion on the front page of the patent application publication and patent.								
	_								
	Small entity sta	itus is claimed.							
Also	enclosed are:				.•				
DRAWINGS:		6 sheets of	formal drawings	sheets of informal drawings					
DEC	CLARATION:	☐ will follow	⊠ executed, is enclosed	unexecuted, is enclosed	d				
ASS	SIGNMENT:	is enclosed	will follow						

CLAIM FOR PRIORITY UNDER 35 U.S.C. § 119 and/or 365: Country Appl. No. MM-DI
UNDER 35 U.S.C. Country Appl. No. MM-DE \$35 U.S.C. Japan 2003-137376 05-15 05-
□ certified copy(ies) enclosed
□ certified copy(ies) enclosed ☑ certified copy(ies) will follow OTHER PAPERS: ☑ A General Authorization for Petitions for Extensions of Time and Payment of Fee ☑ An Information Disclosure Statement. ☑ An Application Data Sheet (ADS). □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
The filing fee has been calculated as follows and in accordance with the enclosed preliminary amendment:
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An Information Disclosure Statement. An Application Data Sheet (ADS). The filing fee has been calculated as follows and in accordance with the enclosed preliminary amendment:
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CLAIMS
No. of Claims Extra Claims Rate Fee
asic Application Fee (1001) \$
otal Claims 5 MINUS 20 = 0 x \$18.00 (1202) =
dependent Claims 2 MINUS 3 = 0 x \$86.00 (1201) =
multiple dependent claims are presented add \$200.00 (1202)
multiple dependent claims are presented, add \$290.00 (1203)
otal Application Fee \$



is respectfully requested.

Attorney Docket No. ____ 012778-129

		Attorney Docket No.	012778-129		
		Application No.			
	Charge to Deposit Account I	No. 02-4800 for the fee due.			
	A check in the amount of is e	enclosed for the fee due.			
X	Charge \$770.00 to credit card. Form	n PTO-2038 is attached.			
X	The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.2 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. To paper is submitted in duplicate.				
Ple	ase address all correspondence concerning th	nis application to:			
	Burns, Doane, Swecker & Mathis, L.L.P. Customer Number 2 1 8 3 9 P.O. Box 1404 Alexandria, Virginia 22313-1404				
		Respectfully submitted,			
		BURNS, DOANE, SWECKER & MATHIS	, L.L.P.		
Ale). Box 1404 xandria, Virginia 22313-1404 3) 836-6620	By allen Cloren en 3000, to	· •		
- ::	d. A il 40, 0004	Platon N. Mandros	•		
riie	d: April 19, 2004	Registration No. 22,124			